

CITY OF BRANSON
110 W MADDUX STE 215
BRANSON, MO 65615
417-337-8549
FAX: 417-334-2391

CITY OF BRANSON

SEWER CONNECTION PERMIT APPLICATION

PERMIT NUMBER: _____

DATE RECEIVED: _____

PROJECT NAME		PROJECT STREET ADDRESS	
OWNER	PHONE:	DESCRIPTION OF WORK	
	MOBILE:		
OWNER'S MAILING ADDRESS	FAX:		
	E-MAIL:		
ARCHITECT	PHONE:		
	MOBILE:		
ARCHITECT'S MAILING ADDRESS	FAX:	ESTIMATED VALUE OF THE PROJECT	
	E-MAIL:		
CONTRACTOR	PHONE:	SEWER CAPACITY FEE	
	MOBILE:	SEWER CONNECTION INSPECTION	
CONTRACTOR'S MAILING ADDRESS	FAX:	WATER METER	
	E-MAIL:	COMMENTS OR DIAGRAM	
I hereby certify that I am the owner or duly authorized owner's agent, that I have read this application and that all information is correct. I further certify that I have read, understand and will comply with all the provisions outlined hereon.			
APPLICANT SIGNATURE	DATE		
Please Print Name			
PROVISIONS: The issuance of this permit shall not be construed to release the owner or owner's agents from the obligation to comply with the provisions of all laws and ordinances, including federal, state and local jurisdictions, which regulate construction and performance of construction. This permit becomes null and void if the construction work authorized is not begun within 180 days from date of issue or if at any time prior to the final inspection and approval the work is suspended or abandoned for 180 days.			
IT IS IMPORTANT TO CALL FOR INSPECTION AT LEAST 24-HOURS IN ADVANCE 243-2731		REVIEWED BY: _____ DATE: _____	
NOTICE: The permit issued shall be displayed on job site at all times during construction. A Job Site Inspection Card must be present on site at all times for inspection sign offs. This document must be turned in to the Planning & Development Department for the issuance of a Certificate of Occupancy or Compliance. All subcontractors must have a Branson City Contractor's License, issued by the Finance Department.			
		UTILITIES: _____	